UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:

Case No. 07-00896

LARRY MARVIN PILLISH

MICHELE LEIGN PILLISH

Debtor(s)

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 01/18/2007.
- 2) The plan was confirmed on 04/04/2007.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on NA .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on $\underline{11/06/2009}$, $\underline{08/04/2010}$.
 - 5) The case was converted on $\frac{10}{01}/2010$.
 - 6) Number of months from filing to last payment: 43.
 - 7) Number of months case was pending: 45.
 - 8) Total value of assets abandoned by court order: <u>NA</u>.
 - 9) Total value of assets exempted: \$24,650.00.
 - 10) Amount of unsecured claims discharged without payment: \$0.00.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$64,319.60 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$64,319.60

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$1,700.00
Court Costs \$0.00
Trustee Expenses & Compensation \$3,064.27
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION:

\$4,764.27

Attorney fees paid and disclosed by debtor: \$1,300.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ACTIVITY COLLECTION SVC	Unsecured	288.00	427.80	427.80	30.19	0.00
AJ PETRONE	Unsecured	208.00	NA	NA	0.00	0.00
ALL CREDIT LENDERS	Unsecured	497.00	NA	NA	0.00	0.00
AMCA	Unsecured	124.00	NA	NA	0.00	0.00
AMERICAN DENTAL CENTER	Unsecured	292.00	NA	NA	0.00	0.00
AMERICASH LOANS	Unsecured	780.00	935.37	935.37	66.00	0.00
AMERICASH LOANS	Unsecured	1,766.00	2,097.02	2,097.02	147.97	0.00
ASPIRE VISA	Unsecured	2,514.00	2,745.59	2,745.59	193.73	0.00
CAPITAL ONE BANK	Unsecured	1,114.00	1,206.12	1,206.12	85.10	0.00
CAPITAL ONE BANK	Unsecured	742.00	NA	NA	0.00	0.00
CAPITAL RECOVERY SVCS	Unsecured	60.00	NA	NA	0.00	0.00
CHECK INTO CASH INC	Unsecured	350.00	404.25	404.25	28.52	0.00
CHRIST HOSPITAL	Unsecured	549.00	NA	NA	0.00	0.00
CHRIST HOSPITAL	Unsecured	697.00	NA	NA	0.00	0.00
COTTONWOOD FINANCIAL LTD	Unsecured	800.00	949.01	949.01	66.96	0.00
CREST ESTATES TOWNHOME ASSOC	Secured	747.00	747.00	747.00	747.00	0.00
DAYTIMER	Unsecured	49.00	NA	NA	0.00	0.00
DERMATOLOGY LIMITED	Unsecured	740.00	NA	NA	0.00	0.00
DUPAGE MEDICAL GROUP	Unsecured	50.00	NA	NA	0.00	0.00
ECAST SETTLEMENT CORPORATION	Unsecured	1,126.00	1,233.22	1,233.22	87.02	0.00
ECAST SETTLEMENT CORPORATION	Unsecured	593.00	745.64	745.64	52.61	0.00
ECAST SETTLEMENT CORPORATION	Unsecured	429.00	466.47	466.47	32.91	0.00
ECAST SETTLEMENT CORPORATION	Unsecured	4,828.00	5,137.72	5,137.72	362.52	0.00
EDWARDS HOSPITAL	Unsecured	311.00	NA	NA	0.00	0.00
EVANSTON NW HEALTHCARE	Unsecured	32.00	NA	NA	0.00	0.00
FAST CASH ADVANCE	Unsecured	300.00	NA	NA	0.00	0.00
GENTIVA CARE CENTRIX	Unsecured	131.00	NA	NA	0.00	0.00
GREAT LAKES SPECIALTY FINANCE	Unsecured	535.00	NA	NA	0.00	0.00
GREGORY J WEBER	Unsecured	158.00	NA	NA	0.00	0.00
HIGHLIGHTS FOR CHILDREN	Unsecured	21.00	NA	NA	0.00	0.00
HSBC CREDIT SERVICES	Unsecured	622.00	NA	NA	0.00	0.00

Scheduled Creditors:						
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Creditor	a.	Claim	Claim	Claim	Principal	Int.
Name	Class	Scheduled	Asserted	Allowed	Paid	Paid
ILLINOIS STUDENT ASSIST COMM	Unsecured	13,079.00	20,860.58	20,860.58	1,471.95	0.00
ILLINOIS TITLE LOANS	Unsecured	NA	45.93	45.93	0.00	0.00
ILLINOIS TITLE LOANS	Secured	323.00	323.00	323.00	323.00	32.10
KARL FRITZ MD	Unsecured	25.00	NA	NA	0.00	0.00
LOYOLA UNIVERSITY OF CHICAGO	Unsecured	1,400.00	NA	NA	0.00	0.00
LUCAS CHIROPRACTIC CENTER	Unsecured	562.00	NA	NA	0.00	0.00
LYNA MASSIH MD	Unsecured	25.00	NA	NA	0.00	0.00
MED SAVIDE MD	Unsecured	58.00	NA	NA	0.00	0.00
MIDWEST ANESTESIOLOGISTS LTD	Unsecured	112.00	NA	NA	0.00	0.00
MIDWEST DIAGNOSTIC PATHOLOGY	Unsecured	83.00	NA	NA	0.00	0.00
PAYDAY LOAN STORE	Unsecured	500.00	585.86	585.86	41.34	0.00
PORTFOLIO RECOVERY ASSOC	Unsecured	1,465.00	1,532.18	1,532.18	108.11	0.00
PORTFOLIO RECOVERY ASSOC	Unsecured	502.00	566.48	566.48	39.97	0.00
PORTFOLIO RECOVERY ASSOC	Unsecured	582.00	624.73	624.73	44.08	0.00
ROCK RUN DENTAL CARE	Unsecured	17.00	NA	NA	0.00	0.00
SCHOLASTIC	Unsecured	57.00	NA	NA	0.00	0.00
SECURED FINANCIAL SERVICE	Unsecured	735.00	NA	NA	0.00	0.00
SHORT TERM LOANS	Unsecured	800.00	NA	NA	0.00	0.00
TCF BANK	Unsecured	144.00	NA	NA	0.00	0.00
WELLS FARGO HOME MTGE	Secured	5,000.00	4,590.15	4,590.15	4,590.15	0.00
WELLS FARGO HOME MTGE	Secured	NA	0.00	0.00	50,979.87	0.00
WHEATON EYE CLINIC	Unsecured	297.00	343.40	343.40	24.23	0.00
WILL CO MEDICAL ASSOC	Unsecured	376.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:	•	•	
	Claim	Principal	Interest
	Allowed	<u>Paid</u>	Paic
Secured Payments:			
Mortgage Ongoing	\$0.00	\$50,979.87	\$0.00
Mortgage Arrearage	\$4,590.15	\$4,590.15	\$0.00
Debt Secured by Vehicle	\$323.00	\$323.00	\$32.10
All Other Secured	\$747.00	\$747.00	\$0.00
TOTAL SECURED:	\$5,660.15	\$56,640.02	\$32.10
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$40,907.37	\$2,883.21	\$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$4,764.27 \$59,555.33	
TOTAL DISBURSEMENTS :		<u>\$64,319.60</u>

12) The trustee certifies that the foregoing summary is true and complete and all administrative matters for which the trustee is responsible have been completed. The trustee requests that the trustee be discharged and granted such relief as may be just and proper.

Dated: 10/13/2010 By: /s/ Glenn Stearns
Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.